## Improving Health Care Surge Capacity for California

Government has a responsibility to protect the public health and ensure our health care system has the capacity to respond to the medical needs associated with emergency events. The Governor is seeking to address gaps in California's capacity to provide healthcare services required during both moderate and catastrophic emergencies. Prior to making this request, existing federal funds were reviewed to determine how much of the need could be filled using federal resources. This May Revise requests \$400,424,000 and 11.5 personnel years (PYs; 8.5 for CDHS and 3 for EMSA) to address gaps in healthcare response capacity. Included is \$400 million from the General Fund and \$424,000 from the Licensing and Certification Special Fund. These funds will build on and augment existing federal funding streams and the new General Fund resources requested in the Governor's January Budget emergency preparedness initiative.

The ability of the health care delivery system to rapidly respond to meet the needs of patients following a manmade or natural disaster is called the "surge capacity" of the system. Surge capacity is a measure of the system's ability to provide care above normal service levels.

The Administration's proposal addresses gaps in health care surge capacity preparedness in three areas. We identify and address the need for:

- standards and guidelines to assist the healthcare system and local governments in mounting a coordinated, integrated surge response that crosses facilities and jurisdictional boundaries;
- equipment and supplies necessary to respond to a moderate event; and
- equipment and supplies necessary to respond to a catastrophic event such as avian influenza.

These gaps must be addressed simultaneously. The basic supply and equipment needs are clear and the nature of the supply chain is such that filling these needs requires immediate action while the work of developing standards and guidelines for the most integrated use of those supplies and equipment is ongoing.

To identify gaps in the existing health care system's ability to surge to meet increased demand, a statewide survey of health care surge capacity was conducted. While previous surveys measured surge capacity in the state, this year's effort was the first time standardized definitions developed by a work group of experts were used. The results of the survey were measured against federal benchmarks and models to identify gaps in preparedness.

Using the survey data, the Department of Health Services identified gaps relative to benchmarks and models established by the federal government for preparedness for a moderate event, such as the Northridge earthquake, and preparedness for a catastrophic event, such as pandemic influenza. The requests included in the May Revise respond to gaps identified in the survey.

The Administration requests resources for the following purposes to increase the surge capacity of California's health care delivery system:

## **Addressing Surge Capacity Standards and Guidelines Gaps**

 Rapidly develop State guidance and standards on the licensing flexibility, liability protection, reimbursement, standards of care, hospital surge plan templates, and standardized training curricula and exercises for surge response. \$5.2 million and 2 PYs.

## **Addressing Moderate Event Surge Capacity Gaps**

- Provide funds to develop and maintain hospital surge plans, including plans for surge staffing, infection control, equipment, systems for managing volunteers, training, and exercises. Strengthen existing emergency planning requirements to require documented hospital surge plans. \$14.5 million.
- Update hospital licensing and infection control regulations for responding to emergencies and require all acute care hospitals to participate in surge planning.
  \$.4 million and 3.5 PYs from the Licensing and certification Special Fund.
- Purchase two deployable mobile field hospitals to increase patient care capacity by 400 beds. \$12.3 million and 3 PYs.

## Addressing Catastrophic Event-Pandemic Influenza Surge Capacity Gaps

- Purchase 3.7 million courses of antiviral drugs through the federal 25 percent discount program. \$53.3 million.
- Purchase ventilators to double the number available in the state. \$99.8 million.
- Purchase medical supplies for alternate care sites. \$164.4 million and 3 PYs.
- Purchase N-95 masks for healthcare workers. \$50.5 million.

Faced with the prospect of floods, earthquakes, terrorist attacks or pandemic influenza, government has a responsibility to plan and prepare for emergency events. This proposal supports local governments in mounting an integrated, coordinated emergency response that crosses facility and geographic boundaries.

No one can predict when the next disaster or public health crisis will occur. We know emergency events are natural phenomena and will occur. Pandemic influenza may be the biggest public health challenge of our time, affecting every aspect of our society.

The time to prepare is now. There are real benefits to preparing and investing now. We will be better prepared for any medical disaster. The elements of planning, training and exercising apply broadly to any hazard and to any emergency. The equipment and supplies purchased now will be available when they are needed. This proposal allows us to be better prepared to protect the health of Californians.